

fact, a life-giving sort of donation that an individual can make. First of all, a bone marrow transplant is a process used to treat a lot of diseases. It's primarily used in the treatment of cancer and the problem, as I understand it, is traditional methods of chemotherapy and radiation that are designed to kill cancerous cells also kill bone marrow cells and the bone marrow cells then, when they're gone, there then is no longer any new blood or the components of blood needed to keep life alive just does not happen. So with the use of a bone marrow transplant, we can inject healthy bone marrow into a cancer patient's system and they can then withstand stronger doses of radiation which will hopefully end up resulting in a healthy cancer patient. I have found, since introduction of this bill, any number of people have had personal experiences with this, including, interestingly enough, former U.S. Senator Paul Tsongas, who was a candidate for President, was a recipient of this sort of treatment. Bone marrow, matching for bone marrow is a lot more complicated process than simply matching for blood transfusions. Probably the odds are that if I would need a blood transfusion that I would be able to...we would be able to match the blood of people in this body and we would be able to find a match for me. Bone marrow transplant matching is far, far more complicated. I think the numbers are probably about 1 out of 20,000 people might have a match, and that was the problem with Aidan O'Neil, was that there just were not suitable matches within the banks of the potential donors. Most people who receive a bone marrow transplant can receive it from a blood relative if there's a match. There's not always a match. The next thing that is sometimes done is while a person is still relative healthy they'll harvest bone marrow from an individual and preserve that and then, after they have gone through the serious radiation treatment, they will reinject that. But in some cases, by the time that they decide they need a bone marrow transplant, the patient has deteriorated to that point. This whole idea of nonrelated transplants is relatively new technology and what we are doing with this is we are asking people to have their blood typed, have their name put on a registry and then, basically for probably 90 percent of the donors, that will be the end of their involvement. However, if their name does come up as a potential match, they will be asked to go in and go through further tests and analysis, and if they finally are determined to be a match, they will be asked if they do, in fact, want to be a donor and that will be the time when they become a donor, is when they have actually been found that there is a match out there. And the involvement of becoming a